PATENT APPLICATION

Attorney Docket No. D/A2068Q1

DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled. A METHOD FOR DETERMINING AN ADJUSTMENT AMOUNT TO AN INPUT CHROMA

the specification and claims are attached hereto		filed on as U.S. Ap	plication No	
I nereby state that I have rethe claims.	eviewed and underst	and the contents of the above	-identified specification, including	
I acknowledge the duty to Code of Federal Regulation		n which is matenal to the pa	tentability as defined in Title 37,	
application(s) for patent lis	ted below, and have ving a filing date befo		if any foreign or U.S. Provisional reign application(s) or Provisional which priority is claimed:	
(Number) (Country)		(Day/Month	(Day/Month/Year Filed)	
		ntor, I hereby appoint the folio	wing registered practitioners Frademark Office connected	
Mark Costello Ronald F. Chapuran Kevin R. Kepner		; Elizabeth F. Harase		
Nota Mae McBain	Reg. No. 35,782	; Philip E. Blair	Reg. No. 36,750	
ADDRESS ALL CORRESPONDENCE TO: Patent Documentation Center Xerox Corporation 100 Clinton Avenue South, Xerox Sq. 20 th Floor Rochester, New York 14644		(name and telephon Philip E. Blair		

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under §1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

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DECLARATION AND POWER OF ATTORNEY, continued

Karen M Braun Name of sole or first inventor:

Inventor's Signature: Kauen M. Residence: 44 Shannon Glen, Fairpon, NY 14450 un M. Brun Date: 8/15/03

Mailing Address: Citizenship: USA (Same as above)